

*Research conducted for the Virginia HIV Community Planning Committee*

## **HIV-Related Knowledge, Attitudes and Behavior of Virginians: 1995 Sample of African-Americans**

A recent survey of African-American adults in Virginia shows widespread knowledge of certain basic facts about HIV and AIDS, including the risk of sharing needles for drug use and the role condoms can play in prevention. The survey also points to gaps in knowledge about transmission and prevention among many of those surveyed.

The survey, conducted on behalf of the Virginia HIV Community Planning Committee by the Survey Research Laboratory at Virginia Commonwealth University, includes responses from 365 randomly selected African-American adults contacted by telephone between January 19 and March 22, 1995. These African-American respondents were part of a general population survey of more than 1,500 Virginia respondents. The survey's purpose was to provide data on the public's knowledge, attitudes, beliefs and behaviors concerning HIV and AIDS.<sup>1</sup>

The HIV Community Planning Committee requested the study because of its special interest in knowledge and beliefs among Virginia's African-Americans, who have been disproportionately affected by the epidemic. While African-Americans make up 18 percent of Virginia's population, at the time of the survey they represented almost half of AIDS cases and almost two-thirds of HIV infections reported to the Virginia Department of Health.<sup>2</sup>

Because regional quotas were set for the African-American respondents, the sample is weighted by region, as well as other demographic factors, to closely represent the population of African-Americans in the state. After weighting, the sample has a sampling error of plus or minus about 5.5 percent at the 95 percent level of confidence.

### **Awareness of HIV/AIDS and beliefs about transmission and prevention**

Awareness of HIV is almost universal; 99 percent of respondents had heard of the AIDS virus. Far fewer said they know someone who is HIV positive. Thirty-one percent said they know at least one person who is infected with HIV, either through encounters at work or in their personal lives. This figure has grown in recent years; in a survey of Virginians conducted in 1988, 16 percent of African-American respondents said they had ever known anyone with HIV.<sup>3</sup>

Respondents were asked to assess the likelihood of transmission in each of nine situations, and the effectiveness of five prevention methods. Responses were compared to answers considered correct or most appropriate by Virginia Commonwealth University's HIV/AIDS Center. The survey showed that while many members of the sample were well informed about HIV transmission and prevention, misconceptions continue to be common.

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<sup>1</sup> The complete text and tables are found in "HIV-Related Knowledge, Attitudes and Behavior of Virginians: 1995 African-American Sample," prepared by the VCU Survey Research Laboratory for the Virginia HIV Community Planning Committee, September, 1995. This report is available from the Survey Research Laboratory.

<sup>2</sup> Virginia Department of Health, Bureau of STD/AIDS,

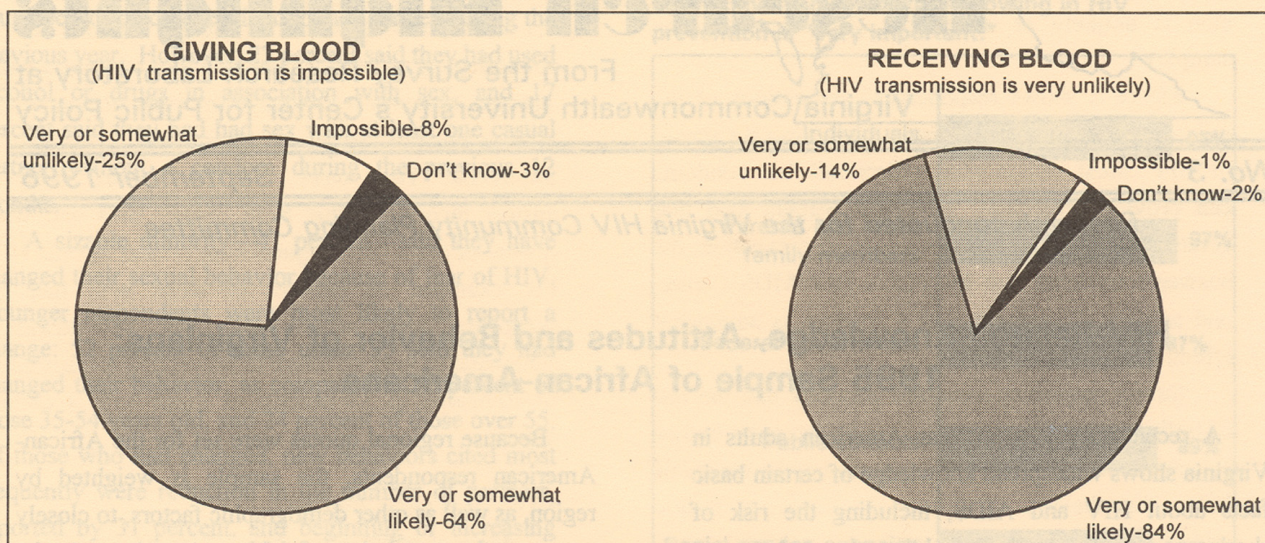
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*Surveillance Quarterly*, Vol. 4, No. 1, Jan 31, 1996.

<sup>3</sup> "AIDS-Related Knowledge, Attitudes, and Behavior of the Virginia Public: The Virginia Statewide Needs Assessment," prepared by the VCU Survey Research Laboratory for the Virginia Department of Health Office of Epidemiology AIDS Program, November 1988.



Figure 1: Perceived likelihood of contracting HIV by giving blood or receiving a blood transfusion.



Nearly all respondents -- 95 percent -- understand that sharing a needle for drug use with a person infected with HIV is very likely to transmit HIV. Most understand that HIV can be transmitted from an HIV-positive pregnant woman to her baby, with 88 percent saying that transmission is very or somewhat likely. Recently developed treatments can reduce the rate of infection from 25 to 30 percent to about 8 percent.

While most respondents know that simply touching someone with HIV does not put one at risk,

many overstated the likelihood of transmission in other situations in which transmission is unlikely or impossible. Notably, as shown in Figure 1, many respondents believe that donating and receiving blood are quite risky. Only 8 percent answered correctly that it is impossible to contract HIV by donating blood, and only 7 percent gave the most appropriate answer that infection through blood transfusion is very unlikely. Recent studies show the chance of transmission through a blood transfusion to be two in one million.<sup>4</sup>

Similarly, while HIV cannot be contracted by eating in a restaurant with an HIV-positive cook or through a mosquito bite, 47 percent of respondents said transmission was very or somewhat likely in the former situation and 31 percent said it was very or somewhat likely in the latter.

The importance of these perceptions becomes evident when they are juxtaposed with views about HIV-positive individuals. For instance, those who incorrectly believe HIV-positive health care workers are likely to transmit HIV to patients are more likely to say that these workers should be barred from practicing. Of those who said health worker-patient transmission is likely (62 percent of the sample), 56 percent said health care workers with HIV should not practice,

#### The SRL and the HCPC

The Virginia Commonwealth University Survey Research Laboratory, founded in 1982, and incorporated in the university's Center for Public Policy in 1994, serves the university, the community, and local and state government through some 100 projects annually. The SRL also manages a number of large data sets available through the Inter-university Consortium for Political and Social Research.

The SRL conducted the survey discussed in this report for the Virginia HIV Community Planning Committee (HCPC), an advisory committee to the Virginia Department of Health. The HCPC includes representatives from communities across Virginia most affected by the epidemic and is responsible for developing an annual HIV prevention plan for Virginia for submission to the Centers for Disease Control and Prevention.

For more information about this survey, the SRL, or the HCPC, contact: VCU Survey Research Laboratory, PO Box 3016, Richmond, VA 23284-3016. Our telephone is (804) 828-8813, and fax (804) 828-6133. Or visit the SRL on the World Wide Web at:

<http://www.vcu.edu/cppweb/srlweb/srlhome.htm>

4 G.B. Schreiber, M.P. Busch, S.H. Kleinman, J.J. Korelitz, "The Risk of Transfusion-Transmitted Viral Infections, *New England Journal of Medicine*, v. 334, No. 26, June 27, 1996.



as compared to 23 percent of those who said transmission is unlikely or impossible (33 percent of the sample).

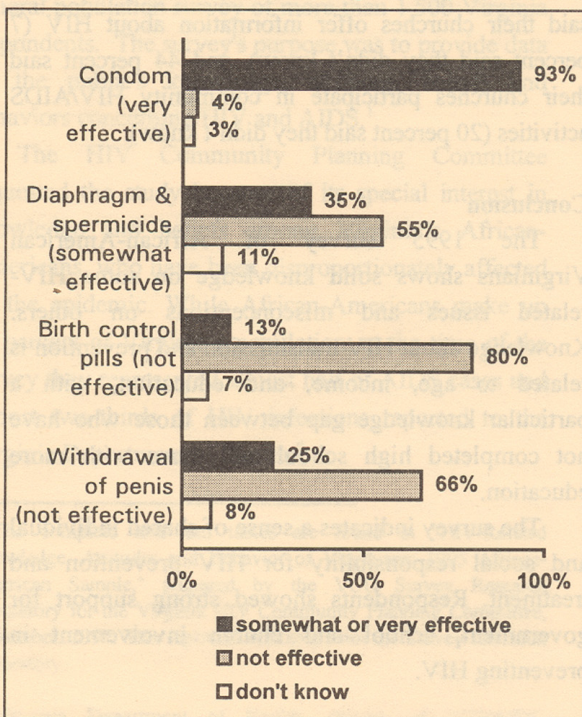
Figure 2 shows respondents' perceptions of the efficacy of several techniques in preventing the spread of HIV. Most respondents understood that condoms can provide protection. Thirty-six percent said that condoms are a very effective means of prevention, the answer considered best by VCU's HIV/AIDS Center, and another 57 percent said a condom is somewhat effective.

Strong majorities answered correctly that the use of birth control pills and withdrawing the penis before ejaculation are not effective in preventing the spread of HIV. Nonetheless, as Figure 2 shows, a sizable minority believes these methods provide some protection.

Knowledge about HIV transmission and prevention is highly related to education, income, and age. The most knowledgeable respondents tended to be young, educated and from upper income categories.

The links with education are particularly notable. For example, on average, respondents who had not finished high school answered 2.4 of the 9 questions

**Figure 2: Perceived effectiveness of prevention methods. Correct answers are given in parentheses.**



about transmission correctly, as compared to a mean of 3.1 for respondents with a high school diploma and 3.5 for college graduates. Those with less education had a stronger tendency to overstate the risks of contracting HIV in situations in which transmission is unlikely or impossible. They were also much more likely to answer incorrectly that birth control pills and withdrawal of penis before ejaculation protect against HIV. For example, 50 percent of those who had not completed high school said that withdrawal is somewhat or very effective in preventing transmission, as compared to 13 percent of those with a college degree.

### HIV/AIDS and Children

More than three-quarters, 78 percent, said that if they had a child in school, they would allow him or her to be in the same classroom with an HIV-positive child. Only 9 percent said they would not; the remainder answered "don't know." Like knowledge about HIV, this willingness was associated with education. Respondents with at least a high school degree were more likely to allow their children to be in a classroom with an infected child than those who had not completed high school – 86 percent as compared to 56 percent.

Most respondents believed that children should receive information about HIV/AIDS. More than three-quarters supported HIV/AIDS education in elementary school, with 22 percent saying it should begin as early as kindergarten or the first grade. Seventy-four percent said that the earliest appropriate age for a parent to talk to his or her child about HIV is 10 years old or younger. Of respondents with children aged five to 21, 71 percent said they had discussed HIV transmission and prevention with their children.

### Respondent Risk, Behavior and Testing

Nine percent of respondents felt they had been put at risk of contracting HIV during the previous year, with 26 percent of this group saying this risk was high.<sup>5</sup> Only a few individuals – about one percent --

<sup>5</sup> The percentages in this section are based on the 247 respondents who were under 65 years old and agreed to continue with this set of questions after being told they were of a personal nature.



said they had injected drugs, had sex with an injecting drug user, or paid or received money for sex during the previous year. However, 23 percent said they had used alcohol or drugs in association with sex, and 17 percent said they had had sex with at least one casual partner without a condom during the previous 12 months.

A sizable minority—41 percent—said they have changed their sexual behavior because of fear of HIV. Younger respondents were most likely to report a change: 52 percent of those under 35 said they had changed their behavior, as compared to 36 percent of those 35-54 years old, and 24 percent of those over 55. Of those who had changed, new behaviors cited most frequently were reduction in the number of partners, reported by 31 percent, and beginning or increasing use of condoms, reported by 47 percent. Twenty-three percent said they have stopped having sex altogether.

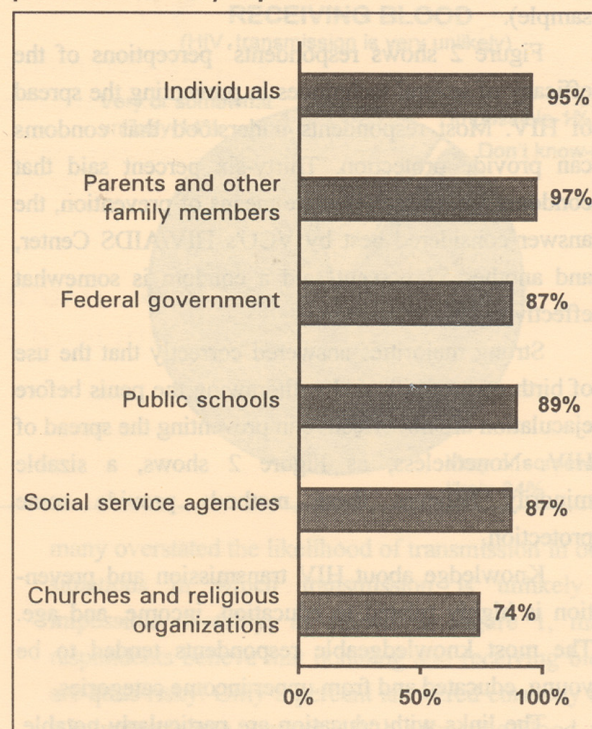
Many of Virginia's African-Americans are being tested for HIV. Sixty-five percent of respondents reported they had been tested, as compared to 24 percent who reported they had been tested in 1988.<sup>6</sup> Younger respondents were more likely to have been tested than older respondents, and for different reasons. More than three-quarters of the those under 35 report having had the HIV test, compared to about half of the 55 and older group. Of the youngest respondents who had been tested, a third said they had done so to determine their HIV status, compared to only 12 percent of the oldest category. Of the oldest group, most had been tested for a medical checkup, hospitalization or surgery.

### Responsibility for HIV Prevention and Treatment

Survey respondents indicated they believe responsibility for HIV prevention should be broadly shared. Figure 3 shows that nearly all said the involvement of individuals and their families in HIV prevention is very important, and most supported involvement of government, public schools, social service agencies, and churches.

Respondents advocated a strong role for churches and other religious organizations, with 88 percent saying churches should provide information about HIV to their congregations; 95 percent saying they should

**Figure 3: Percent of African-American respondents saying involvement of the following in HIV prevention is "very important."**



provide spiritual counseling to those affected by HIV; and 88 percent saying they should participate in community efforts to prevent HIV.

Of respondents affiliated with a church, 48 percent said their churches offer information about HIV (7 percent said they didn't know), and 44 percent said their churches participate in community HIV/AIDS activities (20 percent said they didn't know).

### Conclusion

The 1995 survey of African-American Virginians shows solid knowledge on some HIV-related issues and misconceptions on others. Knowledge about HIV transmission and prevention is related to age, income, and education, with a particular knowledge gap between those who have not completed high school and those with more education.

The survey indicates a sense of shared individual and social responsibility for HIV prevention and treatment. Respondents showed strong support for government, school and church involvement in preventing HIV.

<sup>6</sup> See note 3.